

Pledge Form

In support of the Washington State Jewish Historical Society (WSJHS), I/we are pledging the following:

I	A total sum amou In the following number of Individual installments of Implication Month The first installment will final installment will be re	of installments: \$ ly □Annually be made on:	will be made:	
1	edge, and it may be used f w that the WSJHS relies o	, , ,	ithin the scope of the WSJHS 1 heir financial planning.	mission.
Name:				
Address:				
City:		State:	Zip:	
Phone (H):		Phone (C):		
Email:				
☐ I/we would like to	o receive an invoice & re	minder of our ple	dge	
☐ I/we will be arran	ging for a check(s) to be s	ent according to t	he above noted schedule	
☐ I/we would like y	ou to use our credit card i	nformation for a	secure auto debit of our accoun	ıt.
Name on Credit C	Card:			
			Zip:	
and encourage ot		me(s) in your pub	licly disclosed donor lists to ins	pire
	<i>G</i> ====================================			
Ву:		Date:		